## SUPPORT REQUEST

Prescribing Directive McCoy 350-2

FROM:			DATE:
THRU:			
TO: Directorate of Training, Mob (AFRC-FM-TMR-S) 2168 South 8th Avenue Fort McCoy, Wisconsin 546			
form and submit through co from the RSC, RSG or TAG.	mmand channels for approval.  If this support request form do uments to reemphasize importar	The original must be forwar es not express your suppor	A) at Fort McCoy, complete this ded to Fort McCoy with approval t needs clearly and concisely, ls. If this is a consolidated
Training period:			
2. Type of training:	MUTA or	ANNUAL TNG	ARNG
			USAR
3. Training objectives:			RA
			USMCR
	lification, ARTEP, MOS Training, etc.)		
4. (a) UIC:	(b) DODAAC:	·	
5. Unit POC:  Rank Name	e	Phone	USNR
	·	THORE	USAF
POC FAX Number	POC e-mail address		_
	2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		OTHER
6. Unit's RSC or TAG:			
7. Total number of personne	el to be physically at Fort McCo	y:	

## 8. Complete the elements below based on the number of personnel to be PHYSICALLY at Fort McCoy.

ELEMENTS	NO. OFF M/F	NO. EP M/F	ARRIVAL DATE/TIME	DEPARTURE DATE/TIME	MODE OF TRAVEL	OIC
a. Advance Party						
b. Main Body						
c. Rear Detachment						

Body						
c. Rear						
Detachment						
9. BILLETING REQUIR	EMENTS					
NAF QUARTERS: Roo	oms reserved in this s	ection require	payment.	These rooms	are TDY quarters fu	rnished with
cleaning service and a	menities. Units requi	esting rooms f	or Generals,	Unit Comm	anders, other officer	s and senior enlisted
will provide the Billetin	ng Office with a roste	r prior to arriv	al. Roster v	vill include ra	ank, name, SSN, unit	and dates required.
FAX rosters to (608)	388-3946. For more	information ca	all (608) 388	3-2107. # o	f rooms requested:	
General	Unit	Other		Sr. Enlist (SFC-SG		Enlisted C-SGM)
Officer	Commander	Officers		Male	Fem	
AT and MUTA BOQ/B	EQ: Rooms requeste	d in this section	on are for of	ficer and ser	nior enlisted at no co	st to the occupant.
Unit will sign for room			. Unit may	request clea	ning service with un	it funds or personal
payment as a group.		uired:	2 2 10	ST W	0 5 5	
Male	Female Officer		Sr. Enlis	ted M) Male	Sr. Enlisted (SFC-SGM)	
Officer	Officer		(5) 0-50	IVI) IVIBIC	(0.000	
10. BUILDING REQU	IREMENTS					
Barracks (Cap 50) N	lale	Female	-		Dispensary	
Admin (Cmd Bldg)		(Bn)	-		Company	
Classrooms		(Capaci	ty each)		Chapel	
The state of the s	solidated)				(Refrigeration Only)	
If not drawing a dinir	ng facility, state dinin	g plans (Garris	on Mess Blo	dg 50, dine v	with another unit or f	ield, etc.)
(For units without org	ganic dining capability	, or requiring	advance par	ty to be fed,	indicate support rec	uired in paragraph
Maintananaa Facilit						
iviaintenance raciiit	У					
L						
11. PARKING SPACE	REQUIREMENTS:					
Wheeled Vehicles						
Track Vehicles						
POV's						
Aircraft (Number/Typ	e)					

13.	POL SUPPORT: (# of gals) MOGAS	JP-8 (Ground)	JP-8 (Aviation)
14.	CHEMICAL LATRINE REQUIREMENTS:		
	Number of Latrines:	Date(s) Required	
15.	COMPUTER, COMMUNICATIONS, & NE	ETWORK REQUIREMENTS:	
A.	Communication Requirements		
	Sincgars Single Channel (SC)	# of Frequencies	
	2. Sincgars Frequency Hopping (FH)	200 Freqs: YES / NO	
	3. FM (AN/VCR-12; AN/PRC-77	# of Frequencies	
	4. AM (2018.5 Khz - 27950.0 Khz)	# of Frequencies	
	5. AN/PRC - 127	# of Frequencies	
	6. VHF	# of Frequencies	
	7. UHF	# of Frequencies	
subi line(	communications needs: Request for telemitted on a telephone request form, DA (s) or dial line(s) require a pedestal number NETWORK REQUIREMENTS:	3938 to DBS IM, BLDG 1941, 2 w	eeks in advance of required date. Ma
subi line(	mitted on a telephone request form, DA (s) or dial line(s) require a pedestal number	3938 to DBS IM, BLDG 1941, 2 w	eeks in advance of required date. Ma
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12. If training activities required joint facility usage with another unit, state unit, type facilities, and dining plans.

16. DINING SUPPORT FROM INSTALLATION DINING FACILITY (BLDG 50): Number of persons each meal: (Units with organic mess, for advance and rear detachments ONLY).

DATE	BREAKFAST	LUNCH	DINNER

17. EQUIPMENT REQUIREMENTS: AT/MUTA Units: Submit equipment request through command channels on FORSCOM Form 156-R to CDR, 88th RSC DCSLOG, (AFRC-CMN-LG), 506 Roder Circle, Fort Snelling, MN 55111-4009.

18.	COPIER	REQUEST:	Quantity	,
10.	COLIE	ILCOLOI.	- Caucificity	,

FAX MACHINE REQUEST: Quantity

DATES REQUIRED:

Commande	r 's Signature	
	·	

Commander 's Name (Printed) Rank